South East Regional Trauma Council General Membership Meeting

Coffeyville Regional Medical Center 1:00 p.m. – 3:30 p.m. August 21, 2003

Agenda

1:00 Call to Order and RTC Update

Chris Way Chairperson, SERTC

Chris Way, SERTC Chairperson, called the meeting to order. He introduced Jerry Marquette, CEO of Coffeyville Regional Medical Center who welcomed and provided opening comments to the membership.

Chris discussed the future goals of the RTC including regional plan development, protocols development, and funding.

Rosanne Rutkowski and Kendra Tinsley, Kansas Trauma Program representatives, were introduced and thanked for their assistance and contributions within the region.

Mechanism of Injury

Kurt Dandridge, M.D. St. John's Regional Medical Center

Sharelle Questelle, St. John's was introduced as the Trauma Coordinator at St. John's. Dr. Dandridge presented a PowerPoint presentation on Mechanisms of Injury. Included in the presentation was information regarding the necessity of transferring a patient when the trauma patient's needs exceed the capacity and resources of the facility. A standard set of protocols for use by all facilities within the region was highlighted as paramount to the process of providing timely and effective care to every trauma patient. Dr. Dandridge recommended completion of protocol development before it is actually needed. The PowerPoint presentation will be available on the KDHE website at www.kdhe.state.ks.us/olrh/Trauma.htm.

Advisory Council on Trauma Update

Rosanne Rutkowski Director, Kansas Trauma Program

Trauma education funding is available to pay for 50% of TNCC and ATLS. Funding is available to cover 75% of the cost to attend the PHTLS course. In the SE region, two PHTLS courses and one TNCC course have been funded in part from the Kansas Trauma Program. Funds are also available to pay 100% of instructor fees in TNCC, PHTLS, and ATLS. Rosanne encouraged members to use the available funding and to pass along information to others regarding trauma education funding.

All six-trauma regions have completed surveys and are determining needs within the regions. Most regions will present budgets to the ACT during the August 27 meeting.

The Governor has not made the new appointments to the ACT. The SE region recommended Chris Way, however, information has not been made available regarding

appointments. If appointed, Chris would fill the position previously held by Walt Regehr from Allen County.

A meeting of all regional trauma council executive committees will convene in Wichita at Wesley Medical Center on October 8. The meeting will last from 8:30 to 4:30 and will primarily consist of strategic planning and information sharing among the six regions.

The regional trauma council executive committees have started thinking about regional trauma plan development consistent with the timeline outlined in the Kansas Trauma Plan. Hospital and EMS resources will need to be identified within the region in order to develop the plan.

Currently, 73 hospitals have been trained in the Kansas Trauma Registry and data has been and continues to be submitted to the state central site. This fall, 38 additional facilities will be trained in the registry, which leaves approximately 11 hospitals in the state untrained. The 11 facilities are the smallest facilities within the state that treat few, if any, trauma patients. All hospitals are anticipated to report data by February 2004.

The Board of EMS has been involved in the process of developing an electronic prehospital data collection system that would be compatible with Collector (the Kansas Trauma Registry software). Funding for the data collection system may come from the trauma program.

The EMS Dispatch Survey has been completed and a report should be forthcoming from the Kansas Foundation for Medical Care. Reports will be provided by trauma region. Confirmation was received that the EMS Dispatch grant from HRSA was funded for year 2. EMS Dispatch training will be the focus of year 2 efforts.

The RTCs will be presenting budgets to the ACT on August 27. The budgets may not be funded due to use of trauma funds over the years for such public health programs as stroke, Hepatitis B, pregnancy maintenance and state general fund. Despite this, it is important for the regions to articulate needs related to the delivery of effective and seamless trauma care for patients.

Reports from sub-committees

- Education

Susan Souders, Chairperson

Susan Souders, sub-committee chairperson, provided the report. Susan introduced the sub-committee members: Debbie Bauger, Tom Pryor, Dr. Sonya Culver, and Jeanie Beason. The education meetings are usually scheduled one hour prior to the executive committee meetings at Labette County Medical Center in Parsons.

The education sub-committee completed a survey and the results were summarized. The committee developed an education brochure based on the survey results. A TNCC course was organized and conducted last spring at Labette County Medical Center. Two PHTLS courses have been conducted. Efforts were made to host an ATLS course this fall in the SE region. The sub-committee has established a new goal for hosting an ATLS class next fall. The executive committee will request funding for EMT instruction, as a significant lack of EMTs exists in the more rural areas of the SE region.

- By-Laws

David Cowan Chairperson Chris Way stated that the sub-committee did not have a report to make.

- Trauma Triage, Transport, Transfer Chris Way Chairperson

Chris Way, sub-committee chairperson, provided the report. The Trauma Transport, Transfer and Triage committee has convened on a regular basis consistent with the executive committee meeting schedule and location. Current members of the sub-committee include Dr. Kurt Dandridge, Rod Pace, Susan McDaniels, Tony Mitchell, and Dr. Steve Miller. The sub-committee has focused on developing recommended procedures and guidelines regarding transfer and transport. With respect to triage, the sub-committee researched triage systems and the START triage system will be recommended to the executive committee. The START triage system was included in the SERTC budget for training use by entities within the entire region. The recommendations from the sub-committee regarding transport, transfer and triage will be reported to the executive committee during the September 18 meeting.

Other Business

Chris Way Chairperson

Chris reported that the SERTC would present a budget to the ACT on August 27. Chris pointed out that he does not believe the rural regions of the state should have to compete for funding with urban regions and that continued priority for funding should rest in the rural areas. The membership agreed.

The SERTC will submit a budget request to the ACT that includes: EMT training, START triage software training system, and funding for local grants. Chris opened the floor for discussion of the budget proposal. No discussion ensued.

A major focus of the RTC this year will include outreach within the region with respect to the RTC and the Kansas Trauma Program. Brochures are available to distribute. Regional trauma plan development is a priority and input from the entire region will be essential to an effective regional plan that saves lives and improves the quality of life for SE Kansans who have experienced trauma. The regional plans will be tied back to the overall state plan.

Chris encouraged members to return to their areas and recruit providers for the trauma education classes and call on the executive committee members with questions or concerns. There are many ways to become involved in the regional trauma council including sub-committee participation, survey completion, information sharing, and articles about the RTC in your facility newsletter. The list is long. Call anyone of the executive committee members to find out ways to become a more active participant in the SERTC.

Adjournment

The meeting was adjourned.